Entered - 12/01/00 - sb CL0010719 - DIANNE C. MITCHELL

01-2 -0558

CLAIM OF: KIRK A. STEPHENS,

through his insurance carrier, State Farm Insurance Companies

105 McIntosh Crossing Fayetteville, Georgia 30214

For damages alleged to have been sustained as a result of a vehicular accident on September 9, 2000 at Hill Street and Martin Luther King, Jr. Drive.

THIS ADVERSED REPORT IS APPROVED

CONSENT AGENDA

ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

ADVERSE REPORT

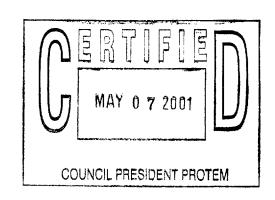
COM Hubba Safety

DATE 4/12/01

CHARLES TANKS

Class Harbon

Class Harbon







RHONDA DAUPHIN JOHNSON, CMC MUNICIPAL CLERK

May 15, 2001

55 TRINITY AVENUE, S.W. SECOND FLOOR, EAST SUITE 2700 ATLANTA, GEORGIA 30335 (404) 330-6033 FAX (404) 658-6103

State Farm Insurance Companies Insurance Carrier Attn: Adduie Perkins 105 McIntosh Crossing Fayetteville, Georgia 30214

01-R-0558

RE: Kirk A. Stephens

Dear Mr. Perkins:

I sincerely regret that your client has been adversely affected by the circumstances raised in his/her claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your client's claim at its regular meeting on May 07, 2001. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the City Attorney's Office/Claims Division at (404) 330-6400.

Yours very truly,

Rhonda Dauphin Johnson, CMC

Municipal Clerk

cc: Claims Division/Law Department

Rhonda Dauphin Johnson

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>00L0719</u>	Date: <u>March 29, 2001</u>
Claimant /Victim KIRK A. STEPHENS	
BY: (Ins. Co.) State Farm Insurance Compani	ies
Address: 105 McIntosh Crossing, Fayette	eville. Georgia 30214
Subrogation: X Claim for Property damage \$	Not Stated Bodily Injury \$
Date of Notice: 11/28/00 Method: Wri	Not Stated Bodily Injury \$
Conforms to Notice: O.C.G.A. 836-33-5	X Ante Litem (6 Mo.) X
Date of Occurrence 09/09/00 Place	X Ante Litem (6 Mo.) X e: Hill Street and Martin Luther King, Jr. Drive
Department Fire	Division:
Employee involved Rocky D. Young	Division:
Employee involved Rocky D. Todag	_ Disciplinary rection
NATURE OF CLAIM: The claimant failed to yield rig	ht-of-way to a City Fire vehicle, operating siren and lights,
causing a collision. The investigation found no neglige	nce on the part of the City driver in causing this accident.
outsing a complete, the investigation round no negrige	nee on the part of the City arriver in causing this accident.
INVESTIGATION:	
Statements: City employee Claimant	Others Written Oral
Pictures Diagrams Reports: Police	X Dept Report X Other
Traffic citations issued: City Driver	Claimant Driver X
Citation disposition: City Driver	Claimant Driver
BASIS OF RECOMMENDATION:	
Function: Governmental X	Ministerial Damages reasonable ted Compromise settlement
Improper Notice More than Six Months	Other Damages reasonable
City not involved Offer reject	red Compromise settlement
Repair/replacement by Ins. Co.	Repair/replacement by City Forces
Claimant Negligent X City Negligent	JointClaim Abandoned
Old Hoghgont Old Hoghgont	OIIIIOIIIII / IOUIII OIIO
	Respectfully submitted,
	- /
	Jam Andrew
/	Men Cutter
	INVESTIGATOR - DIANNE C. MITCHELL
	THE PROPERTY OF THE PROPERTY O
RECOMMENDATION:	
Pay \$ Adverse X // A	Account charged: 1A01 2J01 2H01
Claims Manager: Warm Wiftell	Account charged: 1A012J012H01 Concur/date2G/
Committee Action:	Council Action
FORM 23-61	

'State Farm Insurance Companies



State Farm Insurance Company 105 McIntosh Crossing Fayetteville, Georgia 30214

September 21, 2000

ENTERED - 12-1-00 - SB 00L0719 - DIANNE MITCHELL

City Of Atlanta Fire Dept 1568 Jonesboro Rd Atlanta, GA 30315

RE: Claim Number: 11-3522-172

Date of Loss: September 9, 2000

Our Insured: Kirk A. Stephens

Dear Sir/Madam:

We received a report of an auto loss. Please call us at your earliest convenience to discuss this matter.

Sincer

Auddie Perkins Claim Specialist (770) 460-4885

State Farm Mutual Automobile Insurance Company

01- 2 -0558

HOME OFFICES: BLOOMINGTON, ILLINOIS 61710-0001

President from Bond Presided

RCS# 2838 5/07/01 4:44 PM

Atlanta City Council

Regular Session

CONSENT

PAGES 1 THRU 13

ADOPT

YEAS: 14 NAYS: 0

ABSTENTIONS: 0
NOT VOTING: 2

EXCUSED: 0
ABSENT 0

SEE ATTACHED LISTING OF ITEMS ADOPTED/ADVERSED

ON CONSENT AGENDA

NV McCarty Y Dorsey Y Moore ITEM (S) REMOVED FROM Y Thomas Y Starnes Y Woolard Y Martin Y Emmons **CONSENT AGENDA** Y Bond Y Morris Y Maddox Y Alexander 01-0-0610 Y Winslow Y Muller Y Boazman NV Pitts

ITEMS ADOPTED ON

CONSENT AGENDA

- 1. 00-0-0264
- 2. 01-0-0603
- 3. 01-0-0604
- 4. 01-0-0612
- 5. 01-0-0529
- 6. 01-0-0608
- 7. 01-0-0623
- 8. 01-0-0624
- 9. 01-0-0593
- 10. 01-0-0482
- 11. 01-0-0548
- 12. 00-O-2056
- 13. 01-R-0575
- 14. 01-R-0576
- 15. 01-R-0577
- 16. 01-R-0578 17. 01-R-0579
- 18. 01-R-0580
- 19. 01-R-0648
- 20. 01-R-0581
- 21. 01-R-0574
- 22. 01-R-0594
- 23. 01-R-0595
- 24. 01-R-0617
- 25. 01-R-0491
- 26. 01-R-0571
- 27. 01-R-0572
- 28. 01-R-0602
- 29. 01-R-0565
- 30. 01-R-0644
- 31. 01-R-0552
- 32. 01-R-0553
- 33. 01-R-0554
- 34. 01-R-0555
- 35. 01-R-0556

05/07/01 Council Meeting

ITEMS ADVERSED ON CONSENT AGENDA

- 36. 01-R-0557
- 37. 01-R-0558
- 38. 01-R-0559
- 39. 01-R-0560
- 40. 01-R-0561
- 41. 01-R-0562
- 42. 01-R-0563
- 43. 01-R-0564